

BEST AVAILABLE COPY

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# CLAIMS ONLY

SERIAL NO. \_\_\_\_\_ FILING DATE \_\_\_\_\_

APPLICANT(S) \_\_\_\_\_

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3						
4						
5		1				
6						
7						
8	1					
9		1				
10						
11						
12		1				
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49						
50						
TOTAL IND.	2		↓		↓	
TOTAL DEP.	11		↔		↔	
TOTAL CLAIMS	13					

	*	*	*	*
	IND.	DEP.	IND.	DEP.
51				
52				
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98				
99				
100				
TOTAL IND.		↓		
TOTAL DEP.		↔		↔
TOTAL CLAIMS		██████████	██████████	██████████

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS